

**OFFICE OF THE SECRETARY OF THE STATE**

**AUTHENTICATION / APOSTILLE ORDER FORM**

Website: [portal.ct.gov/sots](http://portal.ct.gov/sots)

Telephone: (860) 509-6002

**Mailing Address: (Direccion postal)**

Connecticut Secretary of the State, Attn: Authentications  
P.O. Box 150470, Hartford, CT 06115-0470

**FEES:** Child Adoption: \$15.00 per document  
Regular Documents: \$40.00 per document  
~~Expedited: Additional \$50.00 per document.~~  
**NOT AVAILABLE**

**Delivery by Fedex, UPS, DHL (Servicio de Mensajero)**

Connecticut Secretary of the State, Attn: Authentications  
165 Capitol Avenue, Suite 1000, Hartford, CT 06106

**PAGO:** Adopción es \$15.00 Por Documento  
Otros documentos son \$40.00

**Checks payable to:** Secretary of the State (Haga los cheques a nombre de la Secretary of the State)

~~**EXPEDITED SERVICE: Orders will be processed and mailed within 24 hours. Adoption documents can not be expedited.**~~  
(Las órdenes serán procesadas y enviadas en 24 horas.. Documentos de adopción no se pueden agilizar.) ~~**Rejected documents will result in the forfeiture of expedited fee. \*\*EXPEDITED SERVICE IS NOT WHILE YOU WAIT. (El servicio acelerado no es mientras espera.)**~~ **EXPEDITED SERVICE IS NOT AVAILABLE AT THIS TIME**

PLEASE TYPE OR PRINT LEGIBLY. (FAVOR DE ESCRIBIR O IMPRIMIR LEGIBLEMENTE): Will not be responsible for misdirected mail if illegible. (No somos responsable de correo mal dirigido.)

- 1. DATE: (Fecha) \_\_\_\_\_ DAYTIME PHONE NO.: (Telefono durante el dia) \_\_\_\_\_
- 2. EMAIL ADDRESS (Dirección de correo electrónico) \_\_\_\_\_
- 3. NAME: (Nombre): First/Primer \_\_\_\_\_ Last/Apellido \_\_\_\_\_
- 4. COMPANY (Compania) (If applicable) \_\_\_\_\_
- 5. ADDRESS: (Direccion) \_\_\_\_\_ CITY(Ciudad) \_\_\_\_\_  
STATE (Estado) \_\_\_\_\_ ZIP CODE(código) \_\_\_\_\_
- 6. FOREIGN COUNTRY in which your documents will be used. \_\_\_\_\_  
(Pais donde sus documentos seran usados)
- 7. CHECK IF DOCUMENTS ARE FOR AN ADOPTION (Marcar si los documentos son para adopcion) \_\_\_\_\_
- 8. NUMBER OF AUTHENTICATION/APOSTILLES REQUESTED. \_\_\_\_\_  
(Numero de certificados para autenticacion/apostilla solicitado)
- 9. CHECK IF YOU WANT ~~EXPEDITED SERVICE~~ (Marcar para Servicio Rapido) \_\_\_\_\_

TOTAL DUE: \_\_\_\_\_ **PLEASE, DO NOT SEND CASH BY MAIL.**

PAYMENT METHOD (Método del pago) \_\_\_\_\_ **\*\*\*CREDIT CARD** (Tarjeta de crédito) \_\_\_\_\_ **CASH** (Efectivo) \_\_\_\_\_ **CHECK** (Compruebe)  
**\*\*\*Please complete the attached credit card sheet. (Por favor complete la hoja de procesamiento de tarjeta de crédito adjunta.**

10. HOW WOULD YOU LIKE YOUR ORDER RETURNED? (CHECK ONE) **\*\*IF NOTHING IS INDICATED, YOUR ORDER WILL BE MAILED.**  
Providing a self-addressed stamped envelope would be appreciated. ¿ Cómo quiere que su orden sea devuelta a usted? (Marque uno) Si no se indica nada, se enviara su pedido.

First class mail \_\_\_\_\_ Prepaid courier service (provide label) \_\_\_\_\_  
(Correo de primera clase) (Servicio de mensajero prepagado – envíe etiqueta)